

# **EXHIBIT A**

FILED

Jan 20, 2013

Secretary of State

CC6483968315

DOCUMENT# P97000100024

**Entity Name:** BLUE SPIKE, INC.

**Current Principal Place of Business:**

16711 COLLINS AVENUE #2505  
SUNNY ISLES BEACH, FL 33160

**Current Mailing Address:**

16711 COLLINS AVENUE #2505  
SUNNY ISLES BEACH, FL 33160

**FEI Number:** 65-0798557

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

---

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PD
Name	MOSKOWITZ, SCOTT
Address	16711 COLLINS AVE #2505
City-State-Zip:	SUNNY ISLES BEACH FL 33160

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** /SCOTT MOSKOWITZ/

P

01/20/2013

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Electronic Signature of Signing Officer/Director Detail

Date

DOCUMENT# P97000100024

**Entity Name:** BLUE SPIKE, INC.

Jan 13, 2014  
**Secretary of State**  
**CC9380040701**

**Current Principal Place of Business:**

16711 COLLINS AVENUE #2505  
SUNNY ISLES BEACH, FL 33160

**Current Mailing Address:**

16711 COLLINS AVENUE #2505  
SUNNY ISLES BEACH, FL 33160

**FEI Number:** 65-0798557

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

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Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PD
Name	MOSKOWITZ, SCOTT
Address	16711 COLLINS AVE #2505
City-State-Zip:	SUNNY ISLES BEACH FL 33160

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** /SCOTT MOSKOWITZ/

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PD

01/13/2014

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Electronic Signature of Signing Officer/Director Detail

Date

DOCUMENT# S78965

Entity Name: WISTARIA TRADING INC.

Jan 20, 2013  
Secretary of State  
CC6048192245

**Current Principal Place of Business:**

16711 COLLINS AVE  
SUITE 2505  
SUNNY ISLES BEACH, FL 33160

**Current Mailing Address:**

16711 COLLINS AVE  
SUITE 2505  
SUNNY ISLES BEACH, FL 33160 US

**FEI Number: 65-0283796**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

ROGERS, SCOTT  
5415 COLLINS AVENUE  
#505  
MIAMI BEACH, FL 33140 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

SIGNATURE:

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Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	P
Name	MOSKOWITZ, SCOTT
Address	16711 COLLINS AVE, #2505
City-State-Zip:	SUNNY ISLES BEACH FL 33160

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: /SCOTT MOSKOWITZ/

P

01/20/2013

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Electronic Signature of Signing Officer/Director Detail

Date

DOCUMENT# S78965

**Entity Name:** WISTARIA TRADING INC.

Jan 13, 2014  
**Secretary of State**  
CC9314962541

**Current Principal Place of Business:**

16711 COLLINS AVE  
SUITE 2505  
SUNNY ISLES BEACH, FL 33160

**Current Mailing Address:**

16711 COLLINS AVE  
SUITE 2505  
SUNNY ISLES BEACH, FL 33160 US

**FEI Number:** 65-0283796

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ROGERS, SCOTT  
5415 COLLINS AVENUE  
#505  
MIAMI BEACH, FL 33140 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	P
Name	MOSKOWITZ, SCOTT
Address	16711 COLLINS AVE, #2505
City-State-Zip:	SUNNY ISLES BEACH FL 33160

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**SIGNATURE:** /SCOTT MOSKOWITZ/

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01/13/2014

Electronic Signature of Signing Officer/Director Detail

Date